

(Check all that apply.)

Change purpose(s) of use

Add purpose(s) of use

BENT-12-04

Change point(s) of diversion/withdrawal

STATE OF WASHINGTON APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF **ECOLOGY MUST ACCOMPANY THIS APPLICATION** BONT-12-04

FOR OFFICE USE ONLY BOWN CHANGE No COUNTY WRIA 31

DATE ACCEPTED 07,09,12 BY

Add point(s) of diversion/withdrawal Change/transfer place of use Other (i.e. consolidation, intertie, trust water) Explain:One new well is to replace two older wells. **IF MORE SPACE IS NEEDED, ATTACH ADD		CHECK No. ECY Coding: 001:002:WR	10285-000011 I Not exempt	
	ATTOWAL OF	LETO (F LEAGE F MINT OF	TITL OLLANDIN	
1. Applicant Information:		PHONE NO.	FAX NO.	
City of Kennewick		(509) 585-4313	(509) 585-4407	
ADDRESS		1 (000)		
PO Box 6108				
CITY		STATE	ZIP CODE	
Kennewick		WA	99336-0108	
CONTACT NAME (IE DIEEEDENT EDOM ADOVE)		DHONE NO	EAVNO	
CONTACT NAME (IF DIFFERENT FROM ABOVE)		PHONE NO.	FAX NO.	
Gary Deardorff ADDRESS		(509) 585-4301		
City of Kennewick, PO Box 6108				
CITY		STATE	ZIP CODE	
Kennewick		WA	99336-0108	
WATER RIGHT OR CLAIM NUMBER GWC00093-D, GWC00094-DV DO YOU OWN THE RIGHT TO BE CHANGED? ☑ YES ☐ NO IF NO, PROVIDE OWNER(S) NAME and ADDRESS: HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5) YEARS? ☐ YES ☑ NO Please attach copies of any documentation that demonstrates consistent, historical use of water since the right was established. Also, if you have a water system plan or conservation plan, please include a copy with your application.				
	CE USE OF		IGE NO	
ECY 040-1-97 (Rev. 07/08) If you need this document in an a Persons with hearing loss can call 711 for Washington F C 6	Relay Service.			

3. Point(s) of Diversion/Withdrawal: A. Existing SOURCE NO. SEC. TWP. WELL TAG # RGE. PARCEL# Layton Park Well #1 SW SW 6 8N 29E 1068030400050 01 Layton Park Well #2 SW SW 6 8N 29E 1068030400050 NA 01 B. Proposed SOURCE NO. 1/4 SEC. TWP RGE PARCEL # WELL TAG # 1/4 #1 Kennewick ASR Well NE SE 17 8N 29E 1178940000010 **ALM 112** 04 DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL? EXISTING: YES NO PROPOSED: ✓ YES NO - IF NO, PROVIDE OWNER(S) NAME: Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment. 4. Purpose of Use: MUNICIPAL A. Existing GPM or CFS ACRE-FT/YR PURPOSE OF USE PERIOD OF USE 400 GPM 1/1 - 12/31 Municipal 70 1000 450 1/1 - 12/31 Municipal **GPM** B. Proposed PURPOSE OF USE GPM or CFS ACRE-FT/YR PERIOD OF USE Muncipal 1400 520 1/1 - 12/31 **GPM** 5. Place of Use: CITY OF KENNEWICK A. Existing LEGAL DESCRIPTION OF LANDS WHERE WATER IS PRESENTLY USED: Place of use coincides with City Limits. Please see attached map. COUNTY PARCEL# # OF ACRES DO YOU OWN ALL THE LANDS IN THE EXISTING PLACE OF USE? YES 🖾 NO - IF NO. PROVIDE OWNER(S) NAME: CİTY OF Kennewick landowners. B. Proposed LEGAL DESCRIPTION OF LANDS WHERE NEW USE IS PROPOSED: Place of use coincides with City Limits. Please see attached map. 1/4 SEC. TWP. RGE. COUNTY PARCEL# # OF ACRES

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? 🔲 YES 🔯 NO - IF NO, PROVIDE OWNER(S) NAME: SOO

above.

Attach a detailed map of your proposed change/transfer. The map should show exist of diversion/withdrawal, place of use and any other features involved with this applicable include a certified copy of the plat map.	
Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSE SET IN 0 – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): Please see attach the city of Kennewick.	
6. Remarks and Other Relevant Information:	
As per RCW 90.14.140(2)(d), municipal water rights are exempt from reling	uishment.
Please see attached Technical Memo regarding well locations, water use, a potential to impair existing water users.	and finding of no
IF FOR SEASONAL OR TEMPORARY, START DATE/ END DATE/	
Certain applications may incur a Real Estate Excise Tax liability for the seller of the v of Revenue has requested notification of potential taxable water right related actions a with a copy of this request.	
Please contact the State Department of Revenue for further information. The phone n The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olyr	
7. Signatures:	
I certify that the information above is true and accurate to the best of my knowl order to process my application, I am hereby granting staff from the Departmen Conservancy Board access to the above site(s) for inspection and monitoring properation of the above application, I understand that all responsibility for the rests with me.	nt of Ecology or the County urposes. If assisted in the
(Applicant)	3 /21 / 2012 (Date)
City of Kennewick (Water Right Holder)	3/21/2012 (Date)
City of Kennewick(Land Owner(s) of Existing Place of Use)	3/21/2012 (Date)
IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON	THE NEXT PAGE.
WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):	
☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLE	ETE
☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION IS INCOME	PLETE
OTHER/EXPLANATION:	
STAFF: DATE:/	/